

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|---------|
| FEE DETERMINATION | SD | 76316 | 4/11/00 |
| O.I.P.E. CLASSIFIER | | 16 | 4-18-00 |
| FORMALITY REVIEW | He | 71423 | 6-13-00 |
| RESPONSE FORMALITY REVIEW | or | 71473 | 7-12-00 |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 + Restricted O Objected

| Claim | Date |
|----------------|---------|
| Final Original | |
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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